Case No. 78227CIP1 (P1510 US CIP) VIA FACSIMILE NO. 571-273-8300

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MAIL STOP RCE COMMISSIONER FOR PATENTS PO BOX 1450 ALEXANDRIA, VA 22313

In re Application of:

YAO

Serial No.:

10/736,859

Filed:

12/16/2006

For:

DOPED ABSORPTION FOR ENHANCED RESPONSIVITY FOR HIGH SPEED PHOTODIODES

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small entity status of this application under 37 CFR § 1.27 has been established by a verified statement previously submitted
- [] A verified statement to establish small entity status under 37 CFR § 1.27 is enclosed.
- [] No additional fee is required.

The fee has been calculated as shown below:

	(Cal. 1)	(Cal. 2)	(Col. 3)		SMALL ENTITY		15 10 20 4 18 1 	LARGE ENTITY	
FOR:	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	FEE		RATE	FEE
TOTAL CLAIMS	22	20	2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	X 25	\$	88	X 50	S 100
INDEPT CLAIMS	2	3			X 100	\$	23	X 200	s
[] FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				3327 (332)	+ 180	5	28	+ 380	
					TOTAL ADD'L FEE			TOTAL ADD'L FEE	\$ 100

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For. IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed.

[X] Authorization is given to charge Deposit Account 50-1465 in the amount of \$100.00 for additional claim fees.

The Commissioner is hereby authorized to charge or credit any discrepancies in fee amounts to Deposit Account No. 50-1465. [X]

PLEASE ADDRESS ALL CORRESPONDENCE TO ATTORNEY OF RECORD: CHARLES E. WANDS \mathbf{x}

Please associate this application with Customer No. 27975. [X]

CHARLES E. WANDS REG. NO. 25,649

Customer No.: 27975

Telephone (321) 725-4760